PART	В-	FEE(S) TRANSMITTA	ī.
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01 FC:2501 02 FC:1504

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7590

09/27/2005

Michael A. Slavin, Esq. McHale & Slavin, P.A. 2855 PGA Boulevard Palm Beach Gardens, FL 33410 Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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	(1)	art maioaroa ooron.
Debr	a N. Gerstemeier	(Depositor's name)
		(Signature)
	11-2-2005	(Date)
FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO

10/666,494

11/07/2005 MBELETE2 00000066 10666494

09/17/2003

FILING DATE OF

700.00 OP 300.00 OP

Torrence Anderson

1251.184

8013

TITLE OF INVENTION: WALL CABINET ASSEMBLY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICA	TION FEE	TOTAL F	EE(S) DUE	DATE DUE	
nonprovisional	YES	\$700		\$300		\$1000		12/27/2005	
EXAMINER ART UT		ART UNIT	NIT CLASS-SUBCLASS						
HANSEN, JAI	3637		312-2	57100					
CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND	dence address or indication of "Formula dence address" (or Change of 22) attached. tion (or "Fee Address" Indication (or more recent) attached. Use D. RESIDENCE DATA TO B as an assignee is identified bein 37 CFR 3.11. Completion of EE.	Correspondence Ition form of a Customer E PRINTED ON THE clow, no assignee dat of this form is NOT a	(1) the nar or agents C (2) the nan registered 2 registered listed, no n E PATENT a will appe substitute to	mes of up to 3 DR, alternatively ne of a single frattorney or age d patent attorne lame will be pri (print or type) ear on the pate for filing an ass	irm (having as a nt) and the name ys or agents. If r nted.	member a as of up to no name is	23	& Slavin, P.	
	Corporation e assignee category or catego	, ,	Bat	avia,	Illinoi:	s			
4a. The following fee(s) are			ayment of l		dividual Co	poration of	other private grot	ip entity Government	
Issue Fee			-	` '	the fee(s) is enc	losed.			
Publication Fee (No s	small entity discount permitte	d) 🗆			Form PTO-2038				
Advance Order - # or			The Direc	ctor is hereby a		arge the rea	uired fee(s), or c	redit any overpayment, to	
5. Change in Entity Status	(from status indicated above)							
a. Applicant claims S	MALL ENTITY status. See	37 CFR 1.27.	b. Applica	ant is no longer	claiming SMAL	L ENTITY	status. See 37 CF	R 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the list sublication Fee (if feetinged) words of the Upited States Pate	e Fee and Jublication vill not be accepted from the and Trademark Off	Fee (if anyone fice.	y) or to re-apply other than the	any previously applicant; a regis	paid issue for tered attorned	ee to the application or the	on identified above.	
Authorized Signature	THU N	/h			Date	11/0	2/05		
Typed or printed name _	Michael A.	Slavin			Registration 1	Vo	34,016		
This collection of information	on is required by 37 CFR 1.3	1. The information is	required to	o obtain or reta	in a benefit by th	e public whi	ch is to file (and	by the LISPTO to process)	

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		10/666,494			
	Filing Date	09/17/2003			
	First Named Inventor	Torrence Anderson			
		3637			
l filing)	Examiner Name	James Orville Hansen			
Total Number of Pages in This Submission 5		1251.184			
		First Named Inventor Art Unit Examiner Name Attorney Docket Number	Filing Date		

	ENCLOSURES (Check all that apply)								
V	Fee Transmi	ttal Form		Drawing(s)				Allowance Communication to TC	
	Fee Attached			Licensing-related Papers				eals and Interferences	
	Extension of Express Aba	, ,		Petition Petition to Convert to a Provisional Application Power of Attorney, Revocal Change of Correspondence Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on C	e Address		(Appea Propri Status	al Communication to TC al Notice, Brief, Reply Brief) etary Information : Letter Enclosure(s) (please Identify):	
	Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts								
		r 37 CFR 1.52 or 1.53	ر نے	/	· · · · · ·				
		SI/GIV/A/	TURJE	OF APPLICANT, ATT	ORNEY, C	R AGE	ENT		
Firm N	ame	McHale & Slavir	n/P.A	١.			·		
Signati		IMI/	<u>'h</u>						
Printed	l name	Michael A. Slavi				_			
Date		11/02	05		Reg. No.	34,016			
CERTIFICATE OF TRANSMISSION/MAILING									
sufficie the dat	I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:								
Signati	ure		4						
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PTO/SB/17 (10-04v2)
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FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

(\$) 1030.00 TOTAL AMOUNT OF PAYMENT

Complete if Known						
Application Number	10/666,494					
Filing Date	09/17/2003 Torrence Anderson					
First Named Inventor						
Examiner Name	James Orville Hansen					
Art Unit	3637					
Attorney Docket No.	1251.184					

METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)					
Check Credit card Money Other None				3. ADDITIONAL FEES					
Deposit Account:									
Deposit Account			Fee	Fee	Fee Code	Fee	Fee Description		
Account		1 1	Code 1051	(\$) 130	2051	(\$) 65	Surcharge - late filing fee or oath	Fee Paid	
Number Deposit			1052	50	2052		Surcharge - late provisional filing fee or		
Account Name			1002	50	2002	25	cover sheet		
	rized to: (check all that apply)		1053	130	1053		Non-English specification		
Charge fee(s) indic	ated below Credit any overpay	ymems	1812		1812		For filing a request for ex parte reexamination		
Charge any addition	nal fee(s) or any underpayment of fee(s)) 1	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action		
	ated below, except for the filing fee	1	1805	1,840*	1805	1,840*	Requesting publication of SIR after		
to the above-identified	deposit account.		4054	400	2054		Examiner action		
F	EE CALCULATION		1251	120	2251	60	Extension for reply within first month		
1. BASIC FILING	FEE		1252	450	2252	225	Extension for reply within second month	_	
Large Entity Small Er		Dotal	1253	′ I	2253	510	Extension for reply within third month		
Code (\$) Code (1254	·	2254	795	Extension for reply within fourth month		
1001 790 2001 3	95 Utility filing fee	———] ¹	1255	2,160	2255	1,080	Extension for reply within fifth month		
1002 350 2002 1	75 Design filing fee	1	1401	500	2401	250	Notice of Appeal		
1003 550 2003 2	275 Plant filing fee		1402	500	2402	250	Filing a brief in support of an appeal		
1004 790 2004 3	95 Reissue filing fee		1403	1,000	2403	500	Request for oral hearing		
1005 200 2005 1	00 Provisional filing fee	l 1	1451	1,510	1451	1,510	Petition to institute a public use proceeding		
l	SUBTOTAL (1) (\$)		1452	500	2452	250	Petition to revive - unavoidable		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			1453		2453		Petition to revive - unintentional	1000.00	
Fee from			1501		2501		Utility issue fee (or reissue)	1000.00	
Total Claims	Extra Claims below Fe	1	1502	800	2502		Design issue fee		
Independent	1 -3** =		1503 1	<i>'</i>	2503		Plant issue fee		
Claims L Multiple Dependent			1460	130	1460		Petitions to the Commissioner		
Large Entity Small	Entity		1807	50	1807		Processing fee under 37 CFR 1.17(q)		
Fee Fee Fee	Fee Fee Description	1	1806	180	1806		Submission of Information Disclosure Stmt		
Code (\$) Code		8	8021	40	8021	40	Recording each patent assignment per property (times number of properties)		
1202 30 220		of 3	1809	790	2809	395	Filing a submission after final rejection (37 CFR 1.129(a))		
1203 360 220	3 180 Multiple dependent claim, if no	ot paid 1	1810	790	2810	395	For each additional invention to be		
1204 200 220	4 100 ** Reissue independent claim over original patent		1801	790	2801	305	examined (37 CFR 1.129(b)) Request for Continued Examination (RCE)		
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**or number previously paid, if greater, For Reispues, see above				Jeu Dy	Jasic F	iiiig re	subtotal (3) (\$) 1030.	00	
SUBMITTED BY			egistrat			(Complete (if applicable))			
Name (Print/Type)	Name (Print/Type) Michael A. (S)ayyn					34,0	716 Telephone (561) 625-6575	;	
Signature				torney/	14		Date 11/07/0	S	

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